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S.D. SEC. OF STATE

STATE OF SOUTH DAKOTA
Statement of Legal Newspaper Ownership and Circulation

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER: Mobridge Tribune		2. DATE: 9-30-21
3. FREQUENCY OF ISSUE: weekly	3A. NO. OF ISSUES PUBLISHED ANNUALLY: 52	3B. ANNUAL SUBSCRIPTION PRICE $ 46.00
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers): 1413 E Grand Crossing Mobridge, SD 57601 | Walworth		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers): 1413 E Grand Crossing Mobridge SD 57601		
6. FULL NAME OF PUBLISHER: Kelsey Majeske		

7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.

FULL NAME	COMPLETE MAILING ADDRESS
J. Louis Mullen	75 N Main Buffalo Wy 82834

8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.

First Northern Bank of Wy 25 S main Buffalo Wy 82834

9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies)	2325	2362
B. PAID AND/OR REQUESTED CIRCULATION		
1. Sales through dealers and carriers, street vendors, and counter sales.	1050	1098
2. Mail Subscription (Paid and or requested)	1003	998
3. Paid Electronic Copies	200	212
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1, 9B2 and 9B3.)	2253	2308
D. FREE DISTRIBUTION		
1. BY MAIL, CARRIER OR OTHER MEANS	42	42
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	0	0
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	2295	2350
F. COPIES NOT DISTRIBUTED		
1. Office use, left over, unaccounted, spoiled after printing	30	12
2. Return from News Agents	Ø	Ø
G. TOTAL (Sum of E, F1 and F2 – Should equal total shown in A.)	2325	2362

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public
I swear that the statements made by me are true, correct, and complete:

Kelsey Majeske (Signature) — Publisher (Title)

State of South Dakota)
§
County of Walworth)

Sworn to before me this 30th day of Sept, 2021

Arden Nelson
Notary Public

My commission expires: August 1st 2025

(Seal)

ARDEN NELSON
Notary Public
South Dakota
SEAL SEAL

Form: SOS REC 05-19/2016